

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006664

FILED
Apr 30, 2004
Secretary of State

Entity Name: CENTRAL FLORIDA FAIR HOUSING COALITION, INC.

Current Principal Place of Business:

570 AVENUE J SE
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

570 AVENUE J SE
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 59-3696280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNHAM, PERRY
1109 11TH COURT N.E.
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURNHAM, PERRY
Address: 1109 11TH COURT NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: CT () Delete
Name: FULSE, BERNARD
Address: 6072 WATERWOOD PATH
City-St-Zip: BARTOW, FL 33830

Title: VC () Delete
Name: HILL, RONALD
Address: 43225 WOODRIDGE DRIVE
City-St-Zip: PLANT CITY, FL 33868

Title: SD () Delete
Name: WOODARD, DERRICK
Address: 2700 IDYLRLIDGE WAY NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: POTTER, JEFFREY
Address: 637 1ST ST SW
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: WYNN, LENONIA
Address: 504 PRADO PLACE
City-St-Zip: LAKE LAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PERRY BURNHAM

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date